

**NC DHHS – NC DMH/DD/SAS
Assertive Community Treatment Team (ACTT)
Endorsement Check Sheet Instructions**

Introduction

Prior to site and service endorsement, business verification must take place. In the process of business verification, the business information presented DMA CIS (Community Intervention Services) application is validated. At that time, the provider organization submits a self study of the core rules (10A NCAC 27G .0201-.0204) verifying that they have met all the requirements therein. (The provider is not required to submit this if nationally accredited, licensed with Division of Health Services Regulation (DHSR) or has had a compliance review from NC Council of Community Programs within the past three years.) The documents created in adherence with the core rules should be utilized as evidence of provider compliance where noted in the check sheet and instructions.

The following set of instructions is to serve as general guidelines to facilitate the review of providers for endorsement. Service definition, core rules (as noted above), staff definitions (10A NCAC 27G .104) and other DHHS communications (e.g. *DMH/DD/SAS Records Management and Documentation Manual*, Communication Bulletins, Implementation Updates, Clinical Coverage Policy 8A, and other publications) should be used to support the reviewer's determination of compliance. In addition, the Business Entity Type Reference document assists to clarify the requirements for different business entities such as corporation, partnerships and limited liability corporations and partnerships. On the endorsement check sheet, there are suggested sources of evidence for locating information that may assist the reviewer in determining compliance with the respective requirements. The items identified are not an exhaustive list of sources, nor must each item named be reviewed. The reviewer examines evidence presented only until the element in question is substantiated as being met by the provider.

Provider Requirements

In this section, the provider is reviewed to ascertain that administrative requirements are met in order for services to be provided. The provision of services is addressed later in this endorsement process. This section is reviewed only during the initial review for business status and does not require further scrutiny unless there is a change in the provider's status that would affect this element.

- a.** Review identified documents for evidence the provider meets DMH/DD/SAS standards as related to administration responsibilities, financial oversight, clinical services and quality improvement. These standards include, but are not limited to, policies and procedures (contents of which are mandated in 10A NCAC 27G .0201 – Governing Body Policies) and the key documents required by law for the formation of the business entity. (Refer to attachment titled Business Entity Type.)
- b.(1).** Review documentation that demonstrates provider is a legal US business entity. Documentation should indicate the business entity is currently registered with the local municipality or the office of the NC Secretary of State, that the information registered with the local municipality or the Secretary of State is current, and that there are no dissolution, revocation or revenue suspension findings currently attached to the provider entity. Also review corporate documentation demonstrating registration to operate a business in NC.

Information for corporate entities may be verified on the web site for the Secretary of State. (Refer to key documents section of attachment titled Business Entity Type.)

- b.(2).** Review the policy and procedure manual. It should contain language indicating intent to have national accreditation within one (1) year of enrollment with DMA. Review DMA enrollment document to verify provider's date of enrollment. Once the provider has been enrolled with DMA for a period of one (1) year, a certification of national accreditation or some other evidence supporting the provider organization's achievement of national accreditation must be produced and validated.

Staffing Requirements

In this section, the reviewer is primarily concerned with the hiring practices of the provider and ensuring that all employees required per the service definition are in place at the time of the clinical interview and are equipped with the evidentiary documentation of education, training and experience for which they were hired. This is important for the clinical integrity of the service. The review of the provision of services is more thoroughly examined in the "Program/Clinical Requirements" section of the endorsement review.

In the desk review, the reviewer is to verify that the provider agency's policies and procedures, as well as other administrative manuals meet the requirements of the service definition. The review of the qualifications of personnel hired will occur later in the endorsement process. Review documentation to verify that provider agency requirements of staff include degrees, licensure and/or certifications that comply with the position as written in the service definition, and are consistent with requirements and responsibilities of their respective job duties. Review job descriptions to determine that the roles and responsibilities identified do not exceed the qualifications of the position. This review ensures that the provider has an understanding of the service definition staffing requirements and has established policies for a program that meet those requirements.

For the clinical interview, review staff employment applications, resumes, licenses, certifications and/or other documentation for evidence that degrees and work experience with the target population the provider will be serving is consistent with the requirements and responsibilities of each position. If **any** staff person hired to meet the staffing requirements of the service definition do not meet the requirements for the position, then the clinical interview does not take place. The clinical interview process is described in Program Requirements.

For the on site review, the endorsing agency verifies documentation reviewed during the desk review and clinical interview (if it has been conducted prior to the on site review). The credentials and qualifications of any additional or ancillary staff hired in the time between the desk review and the on site review are examined.

For the 60 day review, include a review of the consumer record and other items necessary to determine that staff are performing clinical interventions commensurate with their credentials and qualifications as well as within the scope of work the their job descriptions. Review staff schedules, attendance rosters, and caseload assignments and interview staff to ascertain consumer to staff ratios. This review should also include a review of supervision plans, notes and documentation of clinical supervision for all staff. Review supervision plans to ensure that they are individualized and appropriate for the level of education, skill and experience of staff. Review supervision notes, schedules and other supporting documentation that demonstrate on-going supervision consistent with the requirements and responsibilities. Personnel records must demonstrate evidence that all required

training has been acquired by each staff member delivering day treatment services and completed within the specified time frames.

a. All ACT Teams

- a.(1).** Review employment application, resume, license, certification, or other documentation for evidence of degree and work experience with adults with serious and persistent mental illnesses. Review policy and procedure manual, program description, job description for psychiatrist and psychiatrist's schedule for language indicating the expectation that the psychiatrist's role includes: assisting the team leader in providing clinical supervision to team member; monitoring the clinical treatment of all consumers receiving ACTT services; conducting comprehensive psychiatric history, mental status and diagnosis on all consumers receiving ACTT services; attending minimally one daily staff meeting weekly; attending PCP meetings; providing individual psychiatric services to all consumers receiving ACTT services, such as medication monitoring and supportive therapy; and working enough hours to carry out all tasks and develop and maintain effective, comfortable relationship with consumers and team members. Review supervision notes to verify psychiatrist's role in the clinical supervision of team members. Review psychiatrist's schedule for required work hours as follows:
- 32 hours/week for a "large team" (76 – 100)
 - 24 hours/week for a "mid-size team" (51 – 75 consumers)
 - 16 hours/week for a "small team" (50 or fewer consumers)
- a.(2).** Review program description, personnel manual, job description for program/administrative assistant and proposed schedule for language that indicates the expectation that the program/administrative assistant will be 1 FTE with experience in organizing, coordinating and monitoring of non-clinical activities. Review job description, employment application, resume for experience in organizing, coordinating and monitoring of non-clinical activities of the ACTT program. Review program/administrative assistant schedule to verify 1 FTE.
- a.(3).** Review program description, staff roster and consumer caseload to verify staff to consumer ratio does not exceed 1 staff to 10 consumers for a large or a mid-size team and 1 staff to 8 consumers for a small team. In both cases the psychiatrist and program assistant do **not** count in these ratios.

b. Large Team

- b.(1).** Review program description, personnel manual, employee applications, licensure and job descriptions of all team members verifying a minimum of 10 clinical staff following the National ACTT Standards and serving 76 – 100 individuals. Verify that the Team Leader is required:
- to have a master's degree in social work, nursing, psychiatric rehabilitation, or psychology or is a psychiatrist
 - to meet the criteria for Qualified Professional status
 - to have documented strong clinical skills and experience providing treatment to persons with severe and persistent mental illness; and
 - to have supervisory and program management experience.
- Verify that Team Leader and the Psychiatrist share responsibility for clinical supervision of all team members and have supervisory notes on all ACTT members; and share in the clinical treatment of all the consumers receiving ACTT services as evidenced in planning meeting notes, morning meeting notes and staff service notes.

- b.(2).** Review program description, personnel manual, personnel file, job description, resume, and license for nurses verifying there are a minimum of 2 FTE registered nurses on the team who have experience and skill working with persons with severe and persistent mental illness. Verify that the lead nurse is a registered nurse with Qualified Professional status according to 10A NCAC 27G .0104, or is an Advanced Practice Nurse according to NCGS Chapter90, Article 1, Subchapter 32M; and is required to have documented skill and experience providing treatment to persons with severe and persistent mental illness. The second nurse must be, at minimum, a registered nurse with Associate Professional status according to 10A NCAC 27G.0104 with documented supervision plan and supervision notes provided by the lead nurse. Review to ensure that the responsibilities of the position are congruent with the level of education and experience required. Review supervision plan and supervision notes to verify continuous supervision for both positions is provided by Team Leader and psychiatrist.
- b.(3).** Review program description, personnel manual, personnel file, job description, job application, resume, license and certifications to verify 1 FTE team member is a substance abuse counselor, who is either an CCS, LCAS or CSAC; meets the criteria for Qualified Professional status 10A NCAC 27G.0104; and has documented experience and skill working with persons with severe and persistent mental illness and substance abuse disorders. Review to ensure that the responsibilities of the position are congruent with the level of education and experience required. Review supervision plan to verify continuous supervision for the substance abuse counselor is provided by Team Leader and psychiatrist.
- b.(4).** Review program description, personnel manual, personnel file, job descriptions, job application, resume, license and certificates to verify that there is 1 FTE, preferably having master's in rehabilitation counseling, with the responsibility of vocational specialist who is required to have experience and skills working with persons with severe and persistent mental illness providing vocational/rehabilitation treatment/counseling. Review to ensure that the responsibilities of the position are congruent with the level of education and experience required. Review supervision plan verifying that the vocational specialist will receive continuous supervision from the Team Leader and psychiatrist.
- b.(5).** Review program description to determine that there are 2 FTE team members who are either
- a master's level Qualified Professional in mental health, or
 - a master's level Qualified Professional in substance abuse treatment
- Both FTEs must have documented experience and skill providing clinical treatment to persons with severe and persistent mental illness. Review to ensure that the responsibilities of the position are congruent with the level of education and experience required. Review supervision plan verifying that the these individuals will receive continuous supervision from the Team Leader and psychiatrist.
- b.(6).** Review program description, personnel manual, personnel file, job description, job application and certification documents to verify the one or two individuals who comprise the 1 FTE Peer Support Specialist is/are certified and has/have documented experience working with persons with severe and persistent mental illness. Review to ensure that the responsibilities of the position are congruent with the level of education and experience required. Review supervision plan verifying that the Peer Support Specialist will receive continuous supervision from the Team Leader and psychiatrist. Verify that this position is filled by no more than two individuals.
- b.(7).** Review program description, personnel manual, personnel file, job descriptions, job application, resume, license and certificates to verify that there are 2 additional FTEs who are Qualified Professionals in mental health or substance abuse according to 10A NCAC

27G.0104; and have documented experience and skill working with persons with severe and persistent mental illness and substance abuse disorders. Review to ensure that the responsibilities of the position are congruent with the level of education and experience required. Review supervision plan verifying that these individuals will receive supervision from the Team Leader and psychiatrist.

- b.(8).** Review program description, personnel manual, personnel file, job descriptions, job application, resume, license and certificates to verify that any additional clinical staff positions are filled by persons who are, at minimum, bachelor or paraprofessional level with experience and skill working with persons with severe and persistent mental illness. Review to ensure that the responsibilities of the position are congruent with the level of education and experience required. Review supervision plan verifying that the substance abuse counselor will receive supervision from the Team Leader and psychiatrist.

c. Mid-size Team

- c.(1).** Review program description, personnel manual, employee applications, licensure and job descriptions of all team members verifying a minimum of 8 clinical staff serving 51 – 75 individuals. Verify that the Team Leader is required:

- to have a master's degree in social work, nursing, psychiatric rehabilitation, or psychology or is a psychiatrist
- to meet the criteria for Qualified Professional status
- to have documented strong clinical skills and experience providing treatment to persons with severe and persistent mental illness; and
- to have supervisory and program management experience.

Verify that Team Leader and the Psychiatrist share responsibility for clinical supervision of all team members and have supervisory notes on all ACTT members; and share in the clinical treatment of all the consumers receiving ACTT services as evidenced in planning meeting notes, morning meeting notes and staff service notes.

- c.(2).** Review program description, personnel manual, personnel file, job description, resume, and license for nurses verifying there are a minimum of 2 FTE registered nurses on the team who have experience and skill working with persons with severe and persistent mental illness. Verify that the lead nurse is a registered nurse with Qualified Professional status according to 10A NCAC 27G .0104, or is an Advanced Practice Nurse according to NCGS Chapter90, Article 1, Subchapter 32M; and is required to have documented skill and experience providing treatment to persons with severe and persistent mental illness. The second nurse must be, at a minimum, a registered nurse with associate professional status according to 10A NCAC 27G.0104 with documented supervision plan and supervision notes provided by the lead nurse. Review to ensure that the responsibilities of the position are congruent with the level of education and experience required. Review supervision plan and supervision notes to verify continuous supervision for both positions is provided by Team Leader and psychiatrist.

- c.(3).** Review program description, personnel manual, personnel file, job description, job application, resume, license and certifications to verify 1 FTE team member is a substance abuse counselor, who is either an CCS, LCAS or CSAC; meets the criteria for Qualified Professional status 10A NCAC 27G.0104; and has documented experience and skill working with persons with severe and persistent mental illness and substance abuse disorders. Review to ensure that the responsibilities of the position are congruent with the level of education and experience required. Review supervision plan to verify continuous supervision for the substance abuse counselor is provided by Team Leader and psychiatrist.

- c.(4). Review program description, personnel manual, personnel file, job descriptions, job application, resume, license and certificates to verify that there is 1 FTE, preferably having master's in rehabilitation counseling, with the responsibility of vocational specialist who is required to have experience and skills working with persons with severe and persistent mental illness providing vocational/rehabilitation treatment/counseling. Review to ensure that the responsibilities of the position are congruent with the level of education and experience required. Review supervision plan verifying that the vocational specialist will receive continuous supervision from the Team Leader and psychiatrist.
- c.(5). Review program description to determine that there are 2 FTE team members who are either
- a master's level Qualified Professional in mental health, or
 - a master's level Qualified Professional in substance abuse treatment
- Both FTEs must have documented experience and skill providing clinical treatment to persons with severe and persistent mental illness. Review to ensure that the responsibilities of the position are congruent with the level of education and experience required. Review supervision plan verifying that these individuals will receive continuous supervision from the Team Leader and psychiatrist.
- c.(6). Review program description, personnel manual, personnel file, job description, job application and certification documents to verify the one or two individuals who comprise the 1 FTE Peer Support Specialist is/are certified and has/have documented experience working with persons with severe and persistent mental illness. Review to ensure that the responsibilities of the position are congruent with the level of education and experience required. Review supervision plan verifying that the Peer Support Specialist will receive continuous supervision from the Team Leader and psychiatrist. Verify that this position is filled by no more than two individuals.
- c.(7). Review program description, personnel manual, personnel file, job descriptions, job application, resume, license and certificates to verify that any additional clinical staff positions are filled by persons who are, at minimum, bachelor or paraprofessional level with experience and skill working with persons with severe and persistent mental illness. Review to ensure that the responsibilities of the position are congruent with the level of education and experience required. Review supervision plan verifying that the substance abuse counselor will receive supervision from the Team Leader and psychiatrist.

d. Small Team

- d.(1). Review program description, personnel manual, employee applications, licensure and job descriptions of all team members verifying a minimum of 6 clinical staff serving at least 50 individuals. Verify that the Team Leader is required:
- to have a master's degree in social work, nursing, psychiatric rehabilitation, or psychology or is a psychiatrist
 - to meet the criteria for Qualified Professional status
 - to have documented strong clinical skills and experience providing treatment to persons with severe and persistent mental illness; and
 - to have supervisory and program management experience.
- Verify that Team Leader and the Psychiatrist share responsibility for clinical supervision of all team members and have supervisory notes on all ACTT members; and share in the clinical treatment of all the consumers receiving ACTT services as evidenced in planning meeting notes, morning meeting notes and staff service notes.
- d.(2). Review program description, personnel manual, personnel file, job description, resume, and license for nurses verifying there is a minimum of 1 FTE registered nurse who has experience

and skill working with persons with severe and persistent mental illness. Review to ensure that the responsibilities of the position are congruent with the level of education and experience required. Review supervision plan and supervision notes to verify continuous supervision for both positions is provided by Team Leader and psychiatrist.

- d.(3).** Review program description, personnel manual, personnel file, job description, job application, resume, license and certifications to verify 1 FTE team member is a substance abuse counselor, who is either an CCS, LCAS or CSAC; meets the criteria for Qualified Professional status 10A NCAC 27G.0104; and has documented experience and skill working with persons with severe and persistent mental illness and substance abuse disorders. Review to ensure that the responsibilities of the position are congruent with the level of education and experience required. Review supervision plan to verify continuous supervision for the substance abuse counselor is provided by Team Leader and psychiatrist.
- d.(4).** Review program description, personnel manual, personnel file, job descriptions, job application, resume, license and certificates to verify that there is 1 FTE, preferably having master's in rehabilitation counseling, with the responsibility of vocational specialist who is required to have experience and skills working with persons with severe and persistent mental illness providing vocational/rehabilitation treatment/counseling. Review to ensure that the responsibilities of the position are congruent with the level of education and experience required. Review supervision plan verifying that the vocational specialist will receive continuous supervision from the Team Leader and psychiatrist.
- d.(5).** Review program description to determine that there is 1 FTE team member who is a master's level Qualified Professional in mental health. The individual(s) in this position must have documented experience and skill providing clinical treatment to persons with severe and persistent mental illness. Review to ensure that the responsibilities of the position are congruent with the level of education and experience required. Review supervision plan verifying that these individuals will receive continuous supervision from the Team Leader and psychiatrist.
- d.(6).** Review program description, personnel manual, personnel file, job description, job application and certification documents to verify the one or two individuals who comprise the 1 FTE Peer Support Specialist is/are certified and has/have documented experience working with persons with severe and persistent mental illness. Review to ensure that the responsibilities of the position are congruent with the level of education and experience required. Review supervision plan verifying that the Peer Support Specialist will receive continuous supervision from the Team Leader and psychiatrist. Verify that this position is filled by no more than two individuals.
- d.(7).** Review program description, personnel manual, personnel file, job descriptions, job application, resume, license and certificates to verify that any additional clinical staff positions are filled by persons who are, at a minimum, bachelor or paraprofessional level with experience and skill working with persons with severe and persistent mental illness. Review to ensure that the responsibilities of the position are congruent with the level of education and experience required. Review supervision plan verifying that the substance abuse counselor will receive supervision from the Team Leader and psychiatrist.

e. All ACT Teams

Review program description, personnel manual and training plan for evidence of a training plan to meet training requirements within the required time frames. Review supervision plans and notes, training plans, training files and training certificates that verify all ACTT team members have received training in DMH/DD/SAS approved ACTT training and other components required within the required time frames.

Service Type/Setting

The elements in this section pertain to the provider's having an understanding of the Assertive Community Treatment Team Services and the service delivery system.

For the desk review, review documentation to verify that provider demonstrates a schedule of operation, locations of service and interventions provided are within the parameters specified by the service definition. This review ensures that the provider has an understanding of the purpose of the service and has established a schedule and a program that meet those requirements.

Items in this section do not apply to the clinical interview.

For the on site review, confirm findings of the desk review.

For the 60 day review, include a review of consumer records and other items necessary to determine that ACTT is being provided to consumers who meet the eligibility requirements, that interventions occur in the community and that first responder duties are a part of the ACTT's responsibility.

- a. Review policy and procedure manual and program descriptions with language meeting expectation that the ACTT members are to provide direct interventions to an individual in any location in the community, based on the comprehensive assessment, and with the identified, scheduled interventions indicated on the PCP. Also review for language that the team is expected to provide all necessary behavioral health services but will arrange and coordinate services such as medical or dental. Review PCP and progress notes for evidence that the ACTT members provide direct and indirect interventions with the consumer, in any location in the community with an individual, based on the comprehensive assessment, with the identified, scheduled interventions indicated on the PCP. Staff service notes should reflect the delivery of these interventions in any community location with the consumer and indirect interventions with natural supports or needed services in the community. PCP and service notes verify that the team is providing all clinical services, referring out to services such as medical or dental.
- b. Review policy and procedure manuals and program description for language stating that the majority of ACTT Services will be provided in the community. Review service notes and paid claims data to verify that services are provided in a range of community settings such as in the street, homeless shelters, recipient's home, etc.

Program/Clinical Requirements

The elements in this section are reviewed as they pertain to service delivery. It is important that consumers are served in accordance with the service definition according to individual needs identified in the PCP in regard to the frequency, intensity and type of therapeutic interventions. Interventions should reflect clinically recognized models (therapeutic mentoring, positive behavioral supports, motivational enhancement therapy, anger management, etc.).

For the desk review, review documentation to verify that the provider demonstrates a clear understanding of the service definition and the ACTT model.

For the clinical interview utilize the questions attached to the current endorsement policy. Specific expectations for the clinical interview are outlined below.

For the on site review, confirm findings of the desk review and the clinical interview.

For the 60 day review, a review of service records should demonstrate compliance with program requirements as specified in each item below. Review to verify that the provider has an understanding of the ACTT model. Review documentation to determine clinical integrity, coordination other services and supports in delivery of services and documented interventions that indicate adherence to the national ACTT standards.

- a.** Review policy and procedure manuals and program descriptions for language demonstrating that services will be provided as often as the individual consumer needs based on the comprehensive assessment, and as identified in the PCP. Review service notes, PCP, contact log and/or claim form for evidence that each consumer has received from the team, the number of contacts necessary to remain in the community. Staff service notes reflect that the interventions are provided as in the PCP, and modified or changed as clinically indicated with input from the consumer. Contacts should be recorded on the consumer weekly/monthly schedule card.
- b.** Review policy and procedure manuals and program descriptions for language demonstrating that services are provided a minimum of 3 contacts per week per consumer; 80 % of these contacts will be face-to-face with the consumer and 75% in the non office-base or non facility-based (all in aggregate). Review aggregate provider reports, PCP, service notes, consumer weekly/monthly schedule cards, staff daily assignment sheet and claim forms for aggregate of minimum of 3 contacts per week per consumer; 80 % of these contacts will be face-to-face with the consumer and 75% in the non office-base or non facility-based.
- c.** Review in policy and procedure manuals and program descriptions for language demonstrating that for each consumer, a Qualified Professional on the team has the lead responsibility for the development, monitoring and revising of the PCP with the involvement of the consumer, significant others and the rest of the ACTT members. Review PCP and service notes to verify that the Qualified Professional on the team accepts responsibility for the development, monitoring and revising of the PCP with the involvement of the consumer, significant others and the rest of the ACTT members.
- d.(1)** Review policy and procedure manuals and program descriptions for language demonstrating that services will be delivered 24 hours a day, 7 days a week and 365 days a year according to the National ACTT Standards. Review job descriptions indicating that services are to be provided 24/7/365. Review on-call schedule, staff schedule, PCP, crisis plans, service notes reflecting that the ACTT members have provided treatment, rehabilitation and support activities 24/7/365. Review staff schedules, on-call schedules, PCP for crisis plans and staff service notes, consumer weekly/monthly schedule card, team daily assignment sheet for evidence that large and mid-size teams are providing services Monday through Friday, including evenings, and eight hours on Saturday, Sunday and holidays. Small teams in rural areas provide evening, weekends and holiday services as needed by the individuals the team serves.

- d.(2).** Policies reflect that the ACTT will carry out first responder services telephonically or face-to-face (within 2 hours if required). Review on-call schedule, staff schedule, PCP, crisis plans, service notes reflecting that the ACTT members have crisis response where and when it has been needed by the consumer. Psychiatric involvement is expected minimally through telephonic communication with ACTT members and other MD if indicated. On-call begins at the end of service hours, typically 9pm for large teams and 5pm for small rural teams. On-call is rotated by clinical staff meeting QP status. There is back up staff identified in the event the on-call staff needs to make a face-to-face contact. Psychiatrist is available by phone and, when possible, provides face-to-face assessment of the ACTT consumer. If another doctor is used to assess for commitment, the ACTT psychiatrist must communicate with other doctor by phone to provide continuity of care. Consumers of ACTT services should know the number to call to reach the ACTT staff and documentation on crisis plans supports this.
- e.** Review policy and procedure manuals and program descriptions for language demonstrating that services will meet fidelity to the national ACTT model such as evening/weekend/holiday services scheduled for large team and as needed by small rural teams (see above); staffed with required team members with strong clinical skills; services provided in the community with holistic approach; team members conduct a comprehensive assessment on all ACT consumers using this information to develop PCP which identifies the clinical intervention will be provided to the consumer by which team member, when and where. Review PCP, progress notes daily staff assignment sheet, weekly/monthly consumer schedule card for evidence that the team is providing fidelity ACTT services such as 24hr/7 day per week/365 days per year as outlined in national ACTT standards; staffed with required team members with strong clinical skills; services provided in the community with holistic approach; team members conduct a comprehensive assessment on all ACT consumers using this information to develop PCP which identifies the clinical intervention will be provided to the consumer by which team member, when and where.
- f.** Clinical Interview. Use the questions included in the current endorsement policy for interviews with the staff to determine the provider agency's clinical competency to deliver services. For ACTT services, it is not necessary to interview all members of the team. At a minimum, the Team Leader, the psychiatrist, the (lead) RN, one QP and the peer support specialist must be interviewed.

Documentation Requirements

All contacts for Assertive Community Treatment Team services must be documented - a full daily service note is the minimum requirement. Documentation must meet all record and documentation requirements in the DMH/DD/SAS Records Management and Documentation Manual. Review policy and procedure manuals for language that demonstrates that all contacts with or on behalf of the recipient must be recorded in the service record. Review policy and procedure manuals and job descriptions for language demonstrating the ACTT provider will ensure service documentation is completed per Medicaid guidelines. Review policy and procedure manuals for language which addresses completion of required forms, transition and discharge planning.

The 60 day follow-up review should include a review of service records to verify that all components of each full service note are included in the documentation and to verify that contacts are documented. PCPs shall have all the required components and address plans for transition/discharge. Service notes should relate directly to the needs and goals identified in the recipients' PCPs.